## DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

noch Ent	- X		Atty. Docket No.		<b>.</b>
MR 1 9 DE SE	First Name	a inve	ntor <u>Yogesh B. Gia</u>	nchandani, et ai.	
As a below named invento	or, I hereby dec	clare th	at my residence, pos	t office address and	d citizenship are as stated below
I believe I am the original inventor (if plural names are listed invention entitled:					y) or an original, first and join which a patent is sought on th
ASSEMBLY AND PLANAI STRUCTURE SUCH A					
the specification of which:  [ ] is attached heret [ X ] was filed on (MI Number (I hereby author)	M/DD/YYYY	) <u>12/16</u> , an y to ins	/2003 as U.S. Appl d was amended on ( ert the application fi	ication Number or MM/DD/YYYY) ling date and num	PCT International Applicatio (if applicable) ber when they become known.
I hereby state that I have claims, as amended by any amend				the above-identif	ied specification, including the
I acknowledge the duty to with Title 37, Code of Federal Re			which is material to	the examination o	f this application in accordance
I hereby claim foreign pr application(s) for patent or invento one country other than the United foreign application for patent or in of the application on which priorit	or's certificate. States of Ame ventor's certifi	, or § 3 crica, li	65(a) of any PCT is sted below, and hav	nternational applic e also identified be	elow, by checking the box, an
Prior Foreign Application Number(s)	Country		ign Priority Date  MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? (Yes/No)
	Country				
Number(s)		(A	<i>MM/DD/YYYY)</i>	Claimed	(Yes/No)
Number(s)  I hereby claim the benefit	under Title 35	(A	d States Code, § 119	Claimed	(Yes/No)  States provisional application(s
I hereby claim the benefit listed below.	under Title 35	(A	d States Code, § 119	Claimed(e) of any United S	(Yes/No)  States provisional application(s
I hereby claim the benefit listed below.  Application Numb 60/433,846	under Title 35  er(s)  under Title 35  each of the clust paragraph of Title 37, Code	5, Unite	d States Code, § 119  12/16/2002  ed States Code, § 12 f this application is respondent to the states of the state	Claimed  (e) of any United State (MM/  O of any United State disclosed in the Code § 112, I ack	(Yes/No)  States provisional application(s  DD/YYYY)  ates application(s) listed below prior United States application anowledge the duty to disclose
I hereby claim the benefit listed below.  Application Numb 60/433,846  I hereby claim the benefit and, insofar as the subject matter of in the manner provided by the firmaterial information as defined in	under Title 35 eer(s) under Title 35 f each of the cl st paragraph of Title 37, Code or PCT interna	5, Unite	d States Code, § 119  12/16/2002  ed States Code, § 12 f this application is respondent to the states of the state	Claimed  (e) of any United State (MM/  O of any United State (disclosed in the Code § 112, I ack 1.56 which occurred oplication.	(Yes/No)  States provisional application(s  DD/YYYY)  ates application(s) listed below prior United States application anowledge the duty to discloss
I hereby claim the benefit listed below.  Application Numb 60/433,846  I hereby claim the benefit and, insofar as the subject matter of in the manner provided by the fir material information as defined in prior application and the national of the subject material information and the national of the subject material information as defined in prior application and the national of the subject material information and the subj	under Title 35 eer(s) under Title 35 f each of the cl st paragraph of Title 37, Code or PCT interna	5, Unite	d States Code, § 119  12/16/2002  ed States Code, § 12 f this application is recall Regulations, § filing date of this application date of this application date of this applications.	Claimed  (e) of any United State (MM/  O of any United State (disclosed in the Code § 112, I ack 1.56 which occurred oplication.	ates application(s) listed below prior United States application anowledge the duty to disclosed between the filing date of the

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## Declaration for Patent Application (cont'd.)

Atty. Docket No. UOM 0283 PUSP

I hereby appoint the practitioners associated with Customer Number 22045 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to that Customer Number. Telephone calls should be directed to (248) 358-4400.

## **CUSTOMER NO.**

## 22045

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Inventor's signature Certific	alle	Date				
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Full Name of Third Joint Inventor						
Inventor's signature		Date				
		·				
Full Name of Fourth Joint Inventor _						
-		Date				
Mailing address						
Pacidance						

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